



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E347793**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input checked="" type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION

CASE #	14-01903
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LOCAL AGENCY CODING

TOTAL # OF UNITS	02	OBJECT STRUCK
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DATE OF COLLISION	08	08	2014	TIME (2400)	1820	COUNTY #	31	MILES	N	E	IN	OF	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input type="checkbox"/>	NON-INTERSECTION <input checked="" type="checkbox"/>	BLOCK NO. <input checked="" type="checkbox"/>	700
SR9 NE			MILE POST <input type="checkbox"/>	

DISTANCE	200	00	MILES <input type="checkbox"/>	N	E	FEET <input checked="" type="checkbox"/>	S	W	OF (REFERENCE OR CROSS STREET)	N. DAVIES ROAD
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UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET <input checked="" type="checkbox"/>	PHONE
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LAST NAME	UNKNOWN	FIRST NAME	MIDDLE INITIAL
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STREET NEW ADDRESS

CITY	ST	ZIP
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GDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	STATE	SEX M	D.O.B. MMDDYYYY
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 9	RESTR. 9	EJECT 9	HELMET USE 9	INJURY CLASS 0	NATURE OF INJURIES
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LICENSE PLATE #	STATE	VIN#
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	MAKE	MODEL	STYLE SP	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET <input checked="" type="checkbox"/>	PHONE
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LAST NAME	UNKNOWN	FIRST NAME	MIDDLE INITIAL
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STREET NEW ADDRESS

CITY	ST	ZIP
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GDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	STATE	SEX U	D.O.B. MMDDYYYY
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 9	RESTR. 9	EJECT 9	HELMET USE 9	INJURY CLASS 0	NATURE OF INJURIES
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LICENSE PLATE #	ALK5732	STATE WA	VIN# 5XXGN4A76DG190538
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR 2013	MAKE KIA	MODEL OPTIMA	STYLE 4T	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. JOHN RODRICK 2521 SPRUCE ROAD LAKE STEVENS WA 98258 D: 4257663108

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY # CHARTER INDEMNITY 4624422323	CITATION #	CHARGE
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OFFICER'S NAME (PRINT) R. RUTHERFORD	BADGE OR ID # 130	AGENCY WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E347793**

CASE # **14-01903**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		GAGNER LINDA M																
ADDRESS & PHONE #		9928 VERNON ROAD LAKE STEVENS WA 98258 4257601019						SEX	U	D.O.B. MMDDYYYY	11	14	1963					
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		KRAVCHUK LEANNA V																
ADDRESS & PHONE #		10402 33RD STREET SE LAKE STEVENS WA 98258 4253436567						SEX	U	D.O.B. MMDDYYYY	01	28	1995					
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #								SEX		D.O.B. MMDDYYYY								
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

On 08/08/2014 at about 1901 hours, I contacted John Rodrick reference a hit and run to his vehicle which occurred in the Safeway parking lot located at 717 SR9 NE. Roderick exited the store to find damage and what appeared to be black paint transfer on the left rear corner of his vehicle. Roderick found a note with witness "Linda" and "Leanna" phone number on it. The witnesses described the hit and run suspect vehicle as a white truck being driven by a W/M/A that appeared to be in his early twenties. Leanna said that the suspect was "hitting on her" while he was attempting to park. The suspect driver was described a having dark hair and a goatee. The driver was wearing a hat and sunglasses and the witness said she could not identify him again. I was given suspect license plate of B385883 which does not appear to be a good plate. I tried B38588B which returned to a truck but the color listed is black. Both witnesses said the suspect truck was white in color.

**** AUTO-POPULATED SECTION ****

THE FOLLOWING ARE DESCRIPTIONS ENTERED FOR ITEMS SELECTED AS "OTHER":

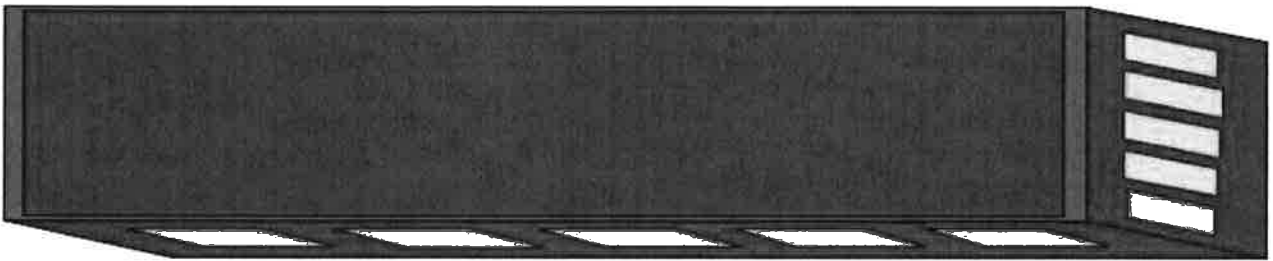
Motor Vehicle Unit 1

Action Code: PARKING

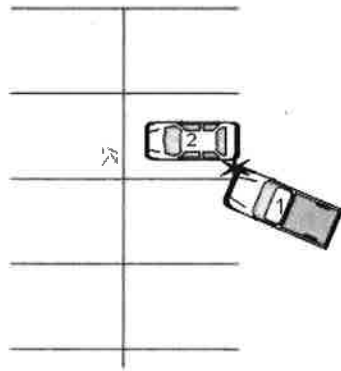
**** END OF AUTO-POPULATED SECTION ****

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

R. RUTHERFORD		08-09-14 03:42 PM	
INVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIST. DET	PLACED SIGNED
APPROVED BY SGT. C. VALVICK 71		DATE 8/10/2014 4:07:32 AM	
BADGE OR ID #	130	ORI #	WA0311900
TIME POLICE DISPATCHED		6:28 PM	TIME POLICE ARRIVED
			7:45 PM



Safeway Strip Mall 717 SR9 NE



NOT TO SCALE



Incident History for: #SS14015510 Xref: #SS14015506

Case Numbers: \$SS14001903

Entered 08/08/14 18:47:27 BY SPSC40 SP0339

Dispatched 08/08/14 19:01:24 BY SPD17 ROGER

Enroute 08/08/14 19:01:24

Onscene 08/08/14 19:01:24

Closed 08/08/14 19:45:59

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 3 Dispo: H

Police BLK: SS001 Fire BLK: AG1619 Map Page: 377G-5 Group: SS1 Beat: WEST

Src: T

Loc: 2521 SPRUCE RD , LKS btwn FOREST RD & 28 ST NE (V)

Loc Info:

Name: RODRICK, JOHN

Addr:

Phone: 4257663108

/1847 (SP0339) ENTRY , CC, COLD H/R, SUS INFO, RP SAYS HE CALLED IN EARL
IER.
/1847 (SP0297) VIEWED
/1848 (SP0339) CROSS #SS14015506
/1858 (SP0388) CHANGE LOC: 717 SR 9 NE , LKS --> 2521 SPRUCE RD , LKS,
BLK: SS002 --> SS001,
TXT: RP CB, STILL WAITING, NEEDS TO LEAVE, REQ O
FCR MEET HIM AT HOME, LOC CHANGED
/1901 (ROGER) DISPOS 19R1 #SS130 RUTHERFORD, OFCR (RICH)
/1905 (SS130) REMINQ 19R1 MDTVEH, ALK5732, , WA, , , , , , , , , ,
/1930 *ONSCNE 19R1
/1935 REMINQ 19R1 MDTWANT, RODRICK, JOHN, D, 082569, , , WA, , , , , , , , , ,
/1936 *MISC 19R1 , CHARTER INDEMNITY 462442323
/1937 (ROGER) ASNCAS 19R1 \$SS14001903
/1940 (SS130) REMINQ 19R1 MDTVEH, B38588B, , WA, , , , , , , , , ,
/1945 *CLEAR 19R1 D/H
/1945 CLOSE 19R1

LEANNA ✓ KRAVCHOK
01-28-95
1040Z 33RD ST SE
LAICE STEVENS 98258